

# The Effect of Availability And Quality of Essential Services on Financial Liquidity at Bhayangkara Lemdiklat Polri Hospital During The Covid-19 Pandemic

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**Abstract:** The purpose of research on the assignment paper for the Microeconomics course is to determine the effect of the availability and quality of essential health services on the financial liquidity of the Bhayangkara Lemdiklat Polri Hospital during the Covid-19 pandemic where there was a simultaneous decrease in supply and demand for essential health services. The results of the study show that there is a significant and positive effect partially on the availability of essential health services on financial liquidity. Also, there is a significant but negative effect on the quality of essential health services on financial liquidity at the Bhayangkara Lemdiklat Polri Hospital. However, simultaneously, both the availability and quality of essential health services at this hospital have a significant and positive effect on its financial liquidity. That means, increasing the availability and quality of essential health services will simultaneously increase the financial liquidity of the hospital during a pandemic, and vice versa.

**Keywords:** Financial Performance, Bhayangkara Lemdiklat Polri Hospital.

## 1. Introduction

With the COVID-19 pandemic occurring in almost the entire world since it was announced by the World Health Organization (WHO) on March 11 2020, it has had consequences for world economic growth which has been forced to slow down by lowering activity tension in all aspects and order of life. Reducing the tension of community life activities in the form of imposing restrictions on community activities known as PPKM certainly reduces interaction between individuals and between companies which in the end becomes a multi-dimensional economic crisis. This crisis is a cause and also a result of a decrease in supply due to a decrease in production and distribution activities of products/services for primary, secondary and so on which of course causes scarcity and an increase in prices along with a decrease in demand due to the weakening of people's purchasing power.

The first COVID-19 case in Indonesia was announced on March 2 2020 and it had a huge impact on Indonesia's economic growth which has decreased from 5.02% in 2019 to 2.97% since the 2020 pandemic. The impact of the pandemic has been felt by various levels of society regardless of economic and social status, type of work either individually or as a business entity.

All parties decreased their activities followed by a decrease in income which forced them to make savings, resulting in a slowdown in the circulation of money.

The Covid-19 pandemic has a domino effect on all aspects of people's lives which in the end leads to a multi-dimensional economic crisis. Almost nothing can avoid this crisis, including public services, including essential health services at hospitals that are referred to for patients affected by Covid-19. In general, these hospitals face problems of financial liquidity, even though all financing for the treatment of Covid-19 patients is the responsibility of the Government. This is because the designation as a referral hospital makes almost all of the hospital's resources which include doctors, nurses and support staff along with infrastructure such as treatment rooms, medical equipment and others absorbed for the treatment of Covid-19 patients. As a result, the treatment of non-Covid-19 patients, which has been the biggest source of income for these hospitals, has dropped dramatically.

In addition to the erosion of hospital resources, the demand for people who are non-Covid-19 patients has also decreased drastically because people are worried about contracting the deadly virus and are holding back from seeking medical attention, especially at hospitals that treat many Covid-19 patients. The average revenue of these referral hospitals has fallen by 50 percent which has resulted in the hospital management facing difficulties in covering their operational costs. It can be said that the Covid-19 pandemic has had an impact not only on supply due to the eroded resources of the Covid-19 referral hospital but also on demand due to decreased purchasing power and interest of the non-Covid 19 patient population for health services at the referral hospital.

Regarding the impact of the pandemic on hospital supply (availability of services), one of them is the percentage of bed occupancy rates during the pandemic which was above 50% for Covid-19 patients, especially in referral hospitals in Jakarta. As is known, Jakarta is an area that has the highest cases of Covid-19 in Indonesia. Of course, the need for inpatient and critical care facilities at hospitals in Jakarta experienced the highest increase compared to other regions. In addition to the availability of treatment facilities, Covid-19 patients must receive other service facilities according to standards such as the availability of equipment for negative isolation or ventilators and other equipment, all of which absorb the budget from the relevant hospitals, although some are subsidized or rebursed by the Government.

Furthermore, related to the demand for essential health services for non-Covid 19 patients, which are the main source of hospital income, decreased sharply due to declining people's purchasing power and high reluctance to seek treatment at hospitals. This reluctance is caused by many factors such as comfort, safety, and public trust in the services of the hospitals they visit. With the current pandemic, of course, people have expectations, especially protection from contracting more of the services they demand so they expect the realization of services to increase as well and make visits to hospitals as a last resort if they have health complaints.

Public interest in visiting the hospital is the main driving factor in increasing demand for essential health services in a hospital. This interest is strongly influenced by their achievement of satisfaction with hospital services that guarantee patient safety, accuracy, and comfort. The level of consumer satisfaction can be represented by the patient or community satisfaction index. If people are dissatisfied with the realization of the service, then their interest in seeking treatment or getting hospital services will drastically decrease. The level of public satisfaction is of course relative because it depends on expectations and realization, both of which fluctuate from time to time according to developing circumstances.

It can be said that during the Covid-19 pandemic there was a decrease in supply (availability of essential health services) and also demand in the form of interest in visiting the hospital for non-Covid-19 patients so that practically the income from the hospital decreased

even though at first glance it seemed that this was compensated by an increase service and care for Covid-19 patients. The government through the Ministry of Health will refund claims submitted by hospitals every two weeks directly by 50%, then the rest will be verified first by BPJS to speed up the disbursement process. Thus it can be said that the disbursement of cashback funds from the Government is not liquid or cannot be immediately disbursed to pay all short-term financial obligations at maturity using available current assets.

The ability to pay these obligations is known as liquidity, the greater the ratio of current assets to current liabilities, the higher the ability of the hospital to cover its short-term liabilities. If a current ratio of 1:1 or 100% means that current assets can cover all current liabilities. So it is said to be healthy if the ratio is above 100%. That is, current assets must be far above the amount of current liabilities. With the Covid-19 pandemic occurring in Indonesia since March 2020, of course it will have a lot of impact on the financial liquidity of Covid-19 referral hospitals such as the Bhayangkara Lemdiklat Polri Hospital. The hospital is a hospital with BLU status and is one of 15 (fifteen) hospitals in South Jakarta that are referred to as Covid 19 patients.

Based on the description of the problems that have been presented, the writer is interested in researching and knowing the effect of the availability and quality of public health services not affected by Covid-19 on the financial liquidity of the Bhayangkara Lemdiklat Polri Hospital. In this study, she will analyze how the conditions and the influence of the availability of services at the hospital owned by the Indonesian National Police and the quality of service are measured based on the satisfaction index of the people who are not affected by Covid-19 on the financial liquidity of the hospital during the Covid 19 pandemic from March 2020 to with February 2022.

## **2. Research Methodology**

The research was carried out directly at the Bhayangkara Lemdiklat Polri Hospital located in Kebayoran Lama Jakarta where at the time this research was carried out the writer served as Director at the hospital. The aim of the study was to find out how the condition of the availability and quality of essential health services for the community was not affected by Covid-19 and the impact on the financial liquidity of the hospital during the Covid-19 pandemic, where there was a decrease in the supply and demand for essential health services due to the siphoning of hospital resources for Covid-19 patients treatment and decreased interest in visiting non-Covid-19 patients to the hospital.

The type of research used is quantitative research with a time-series dimension of months to examine data on the condition of service availability and quality of community services for non-patient Covid-19 as well as the financial liquidity of research subjects from the start of the Pandemic in Indonesia (March 2020) to February 2022. The data collection technique was carried out through direct observation and collection of secondary data in the form of service availability report data and financial liquidity at Bhayangkara Hospital Lemdiklat Polri, report data on the recapitulation of the results of a poll of non-patients with Covid-19 to visit the hospital.

This study uses a quantitative approach with an emphasis on hypothesis testing with multiple linear regression models. The model used to determine the effect of the availability and quality of non-patient Covid-19 community essential health services on financial liquidity at the Bhayangkara Lemdiklat Polri Hospital with BLU status during the Covid 19 Pandemic is

multiple linear regression, with two independent variables and one dependent variable which is formulated as follows:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + e_i \dots$$

Where:

- Y = financial liquidity of Bhayangkara Lemdiklat Polri Hospital  
 $\beta_0$  = intercept;  
 $\beta_{1,2}$  = regression coefficients;  
 $X_1$  = service availability  
 $X_2$  = service quality (satisfaction index of non Covid-19 patients)  
 $e_i$  = intervening variables or other variables not included in the model.

The descriptions of the three operational variables are as follows:

1. Financial Liquidity (Y), which is the dependent variable in the form of the ability level of the Bhayangkara Hospital Lemdiklat Polri to fulfill short-term obligations for 24 (twenty four) months from March 2020 to February 2022. The indicators for liquidity in this study are represented with the value of the current ratio which describes the ability of the hospital's current assets to meet its current liabilities or short-term debt.
2. Service Availability ( $X_1$ ) is an independent variable which is the ability of the Bhayangkara Hospital and the National Police Education and Training Center in terms of providing services to non-Covid-19 patients. The indicator for this variable is the percentage of total resources that can still be utilized after deducting the use of the hospital's resources for treating Covid-19 patients. These resources consist of human resources (doctors, nurses, and other medical personnel), treatment facilities (inpatient rooms, emergency rooms, operating rooms, and others), medical and administrative equipment.
3. Quality of Service ( $X_1$ ) is the independent variable which is the ability of the Bhayangkara Hospital and the Education and Training Center of the National Police in terms of providing services to customers. The service quality indicators used are based on the RATER concept which consists of 5 (five) dimensions, namely: reliability, assurance, tangibles, empathy, and responsiveness. The data used is the average value of the questionnaire that can be collected every month from March 2020 to February 2022 where the questionnaire is assessed using a rating scale from 1 to 5 to show an assessment from 'very low' to 'very high' of 20 (twenty) statements regarding the quality of essential services for non-Covid-19 patients.

### 3. Discussion And Results

Bhayangkara Lemdiklat Polri Hospital is a government hospital under the auspices of the Indonesian National Police which has implemented PPK-BLU with full status since 2017 based on Decree of the Minister of Health No. 920/KMK.05/2017 dated 4 December 2017 with BLU Code: 641952. To be able to provide quality services and maintain the continuity of the institution, of course, it requires sufficient funds to maintain its financial liquidity in order to be able to settle its short-term obligations. To find out the value of BLU's financial liquidity as well as other business entities in general, it is by using the current ratio indicator which is the ratio of the amount of current assets to their short-term liabilities. The closer the liquidity number is to '1' or 100%, the better the management of current assets in financing short-term liabilities.

Current assets owned by the Bhayangkara Lemdiklat Polri Hospital consist of:

1. Cash which is an asset that can be withdrawn at any time when it is needed.
2. Revenue receivables are in the form of types of income in the form of rights but have not been paid.
3. Accounts receivable in the form of hospital bills submitted to other parties as sales of goods or services via credit.
4. Notes receivable or warrants to individuals or institutions that must be paid on a predetermined date.
5. Securities in the form of bonds or shareholdings that can be sold at any time when the hospital needs money
6. Inventory of products that can be purchased for later resale.
7. Expenses are paid in advance but not yet become a liability in the next period.
8. Inventory in the form of products such as medicines and medical equipment owned by hospitals that can be resold when money is needed.

As for short-term obligations, financial obligations must be fulfilled immediately in the not too distant future. Types of short-term obligations at the Bhayangkara Lemdiklat Polri Hospital include financing operationalization of maintenance, maintenance of buildings and medical equipment, payment of electricity, water, telephone and other necessities, payment of debt for products or equipment that has been purchased with an installment system, payment of salaries and honorariums for staff medical, administrative, and other support personnel as well as environmental and tax obligations. All of this must be fulfilled by the hospital management in a short time and is a short-term obligation of the hospital.

For a hospital with BLU status, one of the factors that can affect its financial liquidity is the availability of services to patients in the form of inpatient rooms, medical personnel including doctors, nurses and other medical personnel, operating capital that becomes receivables. With the availability of these services, the hospital can further optimize its income in the form of costs for care/medication, surgery, use of medical equipment such as x-rays, citiscan, laboratories, etc., as well as drug sales at the hospital's pharmacy. In microeconomics, the availability of these services can be categorized as supply, namely the amount of health services offered to meet demand in the form of community needs/demands for essential health services which are basic routine health services whose needs are not incidental, such as services for handling the Covid-19 pandemic. .

During a pandemic, a difficult problem for hospital management was the difficulty in maintaining a balance between fulfilling services in handling a pandemic and fulfilling essential health services. With the surge in Covid-19 cases, especially in DKI Jakarta, the need for services and handling of Covid-19 has increased drastically which has drained the resources owned by hospitals designated as referral hospitals, especially health workers and inpatient facilities. Thus, the portion of essential health services, which was previously the main source of income for hospitals, has greatly decreased. Based on data at the Bhayangkara Lemdiklat Polri Hospital, the portion of services for handling Covid-19 patients reaches an average of above 50%, even in many other hospitals that exceed 100% so that many patients are rejected or do not receive proper treatment due to lack of room facilities and health workers.

The decrease in supply, which was marked by a reduced portion of essential health services at the Bhayangkara Lemdiklat Polri Hospital, was also followed by a decrease in demand in the form of the number of non-Covid patient visits. Most people refrain from visiting and checking their health at hospitals, especially at hospitals that treat many Covid-19 patients. This attitude led to a drastic reduction in patient visits to hospitals, so that average hospital revenue fell by more than 50 percent. This makes it difficult for hospital managers to cover

operational costs and maintain financial liquidity. Even though there has been a transfer of sources of income in the form of treating Covid-19 patients whose entire costs are borne by the Government, payment of claims by the Ministry of Health is often delayed coupled with other problems in the form of disputed claims which delays the payment process.

Based on the author's observations, it turns out that the decrease in supply in the form of the availability of essential health services caused by taking the portion of services for Covid-19 patients does not correlate with the number of visits by non-Covid-19 people to receive health services at the Bhayangkara Lemdiklat Polri Hospital. Data on visits to these hospitals show that when the portion of services increases, the number of visits does not always increase and even continues to decrease. This condition refutes the negative stigma which concludes that the decrease in the number of non-Covid-19 patient visits is caused by a reduced supply of hospital services as a result of fulfilling the need for Covid-19 patient care services. Thus it can be said that the Covid-19 pandemic has caused a decrease in the supply and demand for essential health services for the community.

There are many factors that have caused a decrease in demand for essential health services at Covid-19 referral hospitals such as doubts about the hospital's ability to provide the expected service (reliability), knowledge and focus of attention of hospital personnel in serving (assurance), environmental comfort and health facilities (tangible), attention to non-Covid patients (emphaty), as well as a fast and responsive response in providing services (responsiveness). The perception in the community is that by focusing all components of the hospital on handling Covid-19, the quality of essential services for the community will be neglected. The community's doubts are of course very reasonable because they have certain expectations of the quality of service realized by the hospital and they expect the realization of the service they receive is in accordance with expectations.

The achievement of realization in accordance with expectations is a standard of satisfaction for the people who are its customers. The writer suspects that the decreased demand for essential health services in a hospital is caused by a decrease in the patient satisfaction index for the quality of health services in that hospital. Of course, with an understanding of the escalation of the macro environment where there is an extraordinary pandemic, the community will certainly make adjustments to their level of expectations so that they are not too high. In this way, the achievement of even low service realization can provide a high level of satisfaction because expectations are not high or even lower than realization.

Based on the empirical studies above, it can be said that the Covid-19 pandemic has affected the decline in essential health supply (service availability) and demand (service quality satisfaction), both of which have the potential to affect financial liquidity Bhayangkara Lemdiklat Polri Hospital as one of the BLU status hospitals and also become one of the referral hospitals for Covid-19 patients. To find out how the condition and effect of the availability and quality of essential health services partially or simultaneously on the financial liquidity of the hospital during the Covid-19 pandemic, the following data is presented for the three variables for 24 (twenty four) months from March 2020 to February 2021 as in Table 1 below:

**Table 1:** Operational Data Variables Tested

Year	Month	Service Availability (%)	Service Quality (%)	Liquidity (%)
2020	Mach	92,4	76,5	217,1
	April	87,8	68,2	188,5
	May	88,3	70,3	158,1
	June	76,4	65,8	203,4
	July	93,6	78,4	180,0
	Agustus	86,2	66,3	139,2

2021	September	90,1	74,4	114,7
	October	78,3	82,8	186,8
	November	89,7	64,2	168,1
	December	85,3	68,6	125,3
	January	88,2	67,4	126,7
	February	74,5	70,8	96,9
	Mach	76,4	72,1	97,3
	April	65,3	76,4	117,1
	May	74,2	79,3	107,8
	June	75,6	74,4	128,3
	July	62,0	65,4	98,1
	Agustus	64,5	62,8	97,5
2022	September	68,3	66,5	97,8
	October	72,9	69,4	98,2
	November	65,3	76,4	79,1
	December	66,2	76,0	69,4
	January	63,1	75,6	99,0
	February	67,4	78,2	74,5

Source: Data from Bhayangkara Lemdiklat PolriHospital

The data in Table 1 shows that the unconducive economic conditions due to the Covid 19 pandemic which began in March 2020 and reached its peak in February 2022 had a significant impact on the availability and quality of services which ultimately affected the financial liquidity of the Bhayangkara Hospital Lemdiklat Polri Hospital. During 24 months there were 13 times a decline in financial liquidity worth 307.3% and 10 times an increase with a value of only 189.5%, thus there has been a decrease in the value of financial liquidity with a slope of -38.4%. Likewise what happened to service availability, even though there were only 10 times the value decreased was 126.3% while the 13 times the increase was only 64.2% so that the slope level was -41.8%. It is different from the quality of service with an indicator of patient satisfaction which has decreased 10 times with a volume of 62.0% and 13 times an increase but with a volume of 67.0% so that it can be said that there is a positive trend or slope of 7.5%.

Based on this analysis, it can be said that during the Covid 19 pandemic there was negative pressure on the availability of services and financial liquidity at the Bhayangkara Lemdiklat Polri Hospital, but instead there was a positive trend in service quality. From the data in Table 2 it is known that there is no significant relationship between service availability and service quality where the correlation coefficient is -0.059 with a correlation significance of 0.078 ( $>0.05$ ). Although there is no significant relationship, it can be seen that the trend of the relationship between the two variables is negative, which means a decrease in service availability goes hand in hand with an increase in service quality. Thus it can be said that there is no multicollinearity between the independent variables tested. so that both are feasible to be used as predictors of fluctuations in financial liquidity in the hospital.

**Table 2 :** SPSS Data Processing Output: Correlations

<b>Correlations</b>			
	<b>Service Availability</b>	<b>Service Quality</b>	Liquidity

Pearson Correlations	<b>Service</b>	1,000	-,059	,682
	<b>Availability</b>	-,059	1,000	-,425
	<b>Service Quality</b>	,682	-,425	1,000
	<b>Liquidity</b>			
Sig. (2-tailed)	<b>Service</b>	,078	,078	,031
	<b>Availability</b>	,031	,002	,048
	<b>Service Quality</b>			
	<b>Liquidity</b>			
N	<b>Service</b>	24	24	24
	<b>Availability</b>	24	24	24
	<b>Service Quality</b>	24	24	24
	<b>Liquidity</b>			

In Table 3 below the value 0.694 is stated in the R Square column which is an indicator of how much the variation of the two independent variables tested affects the dependent variable. This shows that 69.4% of the variation in the value of the hospital's financial liquidity can be explained by the availability and quality of services, only 30.6% by other variables not tested in this study.

**Table 3:** SPSS Data Processing Output: Model Summary

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,833 <sup>a</sup>	,694	,515	,525

1. a..Predictors: (constant), Service Availability, Service Quality
2. b. Dependent Variable: Liquidity

3.

4. Then to find out whether there is a significant effect of the availability and quality of services on financial liquidity, an analysis of the Coefficients data processing output is performed in Table 4 as follows:

**Table 4:** SPSS Data Processing Output: Coefficients

Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized coefficients	t	Sig.
		B	Std. Error	Beta		
1	(constant)	-4,412	2,981		-1,673	,188
	Service	,541	,635	,743	7,437	,029
	Availability	-,442	,326	,564	-5,552	,047
	<b>Service Quality</b>					

a. Dependent: Liquidity

Data in table 4 shows that the availability and quality of services partially have a significant effect on the financial liquidity of the Bhayangkara Lemdiklat Polri Hospital. This is determined by comparing the probability value (sig.) of the effect of each independent variable on the dependent variable with a standard value of 0.05. It is known that the probability



number (sig.) of service availability is 0.029 and service quality is 0.047. Both are smaller than 0.05, so it is determined that the two variables have a significant influence on the dependent variable.

To determine whether the effect is positive or negative, it can be seen whether there is a negative sign (-) on the test number of each independent variable. From the data in Table 4 there is no sign (-) on the service availability test score, so service availability has a positive effect on financial liquidity, while on the service quality index test number there is a (-) sign which means service quality has a negative effect on Bhayangkara Lemdiklat Polri hospital financial liquidity, which means that the increasing quality of service will partially decrease the financial liquidity of the Bhayangkara Lemdiklat POLRI hospital.

**Tabel 5:** Output Pengolahan Data SPSS: ANOVA  
ANOVA<sup>b</sup>

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	471,214	2	71,255	6,224	,036 <sup>a</sup>
	Residual	73,269	26	3,923		
	Total	544,543	24			

a. Predictors: (constant), Service Availability, Service Quality

b. Dependent Variable: Liquidity

In Table 5 above, it can be seen that the significance value used as a probability number for the simultaneous effect of availability and service quality on financial liquidity is 0.036. This figure is smaller than 0.05 and greater than 0.01, which means that the two independent variables simultaneously have a significant effect on  $\alpha$  0.05 or 95% on financial liquidity at the Bhayangkara Lemdiklat Polri Hospital. In the same table, namely the number F test, there is no negative sign (-), which means that there is a positive influence or increasing the availability and quality of services will also increase the value of financial liquidity at the Bhayangkara Lemdiklat Polri Hospital.

## 4. Conclusion

Based on the results of research on the effect of service availability and quality on financial liquidity at the Bhayangkara Lemdiklat Polri Hospital during the Covid 19 pandemic, it can be concluded that:

1. There is a significant and positive influence on the availability of services on the financial liquidity of the Bhayangkara Hospital Lemdiklat Polri, which means that increasing the availability of services will also increase the financial liquidity of the hospital.
2. There is a significant but negative effect of service quality on the financial liquidity of the Bhayangkara Lemdiklat Polri Hospital, which means that the higher the service quality, the lower the hospital's financial liquidity, and vice versa.
3. There is a significant and positive influence simultaneously on the availability and quality of services on the financial liquidity of the Bhayangkara Hospital and the Education and Training Center of the Indonesian National Police, which means that increasing the availability and quality of services simultaneously will also increase the financial liquidity of the hospital.

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